## Attorney Docket No. 2232-198 Arthur E. COLVIN, Jr. First Named Inventor **DECLARATION AND POWER OF** ATTORNEY FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date $\square$ Declaration Declaration Submitted Submitted Group Art Unit after Initial with Initial Filing Filing Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: A HOUSING FOR A CIRCUIT THAT IS TO BE IMPLANTED IN-VIVO AND PROCESS OF MAKING THE SAME the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority Not<br>Claimed | Certified Copy<br>YES | Attached?<br>NO                       |
|---------|-------------------------------------|-------------------------|-----------------------|---------------------------------------|
|         |                                     |                         |                       |                                       |
|         | Country                             | , , , , , , , ,         |                       | '   '   '   '   '   '   '   '   '   ' |

| Application Number(s) | Filing Date (MM/DD/YYYY) |
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For we hereby appoint the registered practitioner(s) associated with Customer No. 6449 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number 6449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| NAME OF SOLE OR FIRST INVENTOR:                                                                                                                                                                                                                                                             | [ ] A petition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | has been filed for this u                                                                                                                               | nsigned inventor                                 |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--|--|
| Given Name: Arthur Earl (first and middle [if any])                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Family Name: <b>COLVIN</b> or Surname                                                                                                                   |                                                  |  |  |
| Inventor's Signature                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date                                                                                                                                                    |                                                  |  |  |
| Residence: City: Mt. Airy                                                                                                                                                                                                                                                                   | State: MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Country: <b>USA</b>                                                                                                                                     | Citizenship: USA                                 |  |  |
| Mailing Address: 4155 Baltimore National Pike                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                         |                                                  |  |  |
| City: Mt. Airy                                                                                                                                                                                                                                                                              | State: MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Zip: <b>21771</b>                                                                                                                                       | Country: <b>USA</b>                              |  |  |
| NAME OF SECOND INVENTOR: [ ] A petition has been filed for this unsigned inventor                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                         |                                                  |  |  |
| Given Name: Carrie R. (first and middle [if any])                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Family Name: <b>LORENZ</b> or Surname                                                                                                                   |                                                  |  |  |
| Inventor's Signature Carrie R. Long.                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date                                                                                                                                                    |                                                  |  |  |
| Residence: City: Woodbine                                                                                                                                                                                                                                                                   | State: MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Country: <b>USA</b>                                                                                                                                     | Citizenship: <b>USA</b>                          |  |  |
| Mailing Address: 15685 Old Frederick Road                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                         |                                                  |  |  |
| City: Woodbine                                                                                                                                                                                                                                                                              | State: MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Zip: <b>21797</b>                                                                                                                                       | Country: USA                                     |  |  |
| City. Woodbine                                                                                                                                                                                                                                                                              | Otato: MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Zip. 21191                                                                                                                                              | Country. USA                                     |  |  |
| NAME OF THIRD INVENTOR:                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | nas been filed for this un                                                                                                                              | ·                                                |  |  |
|                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                         | signed inventor                                  |  |  |
| NAME OF THIRD INVENTOR: Given Name: Casey J.                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | nas been filed for this un<br>Family Name: O'CON                                                                                                        | signed inventor                                  |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Family Name: O'CON or Surname                                                                                                                           | signed inventor                                  |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature                                                                                                                                                                                             | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Family Name: O'CON or Surname                                                                                                                           | nsigned inventor                                 |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg                                                                                                                                                              | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Family Name: O'CON or Surname                                                                                                                           | nsigned inventor                                 |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg  Mailing Address: 105 Goucher Terrace                                                                                                                        | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Family Name: O'CON or Surname  Date  Country: USA                                                                                                       | Citizenship: USA                                 |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg  Mailing Address: 105 Goucher Terrace  City: Gaithersburg                                                                                                    | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ras been filed for this un<br>Family Name: O'CON<br>or Surname<br>Date<br>Country: USA                                                                  | Citizenship: USA  Country: USA  nsigned inventor |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg  Mailing Address: 105 Goucher Terrace  City: Gaithersburg  NAME OF FOURTH INVENTOR:  Given Name: Steven J.                                                   | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ras been filed for this un Family Name: O'CON or Surname Date Country: USA Zip: 20877 has been filed for this un Family Name WALTE                      | Citizenship: USA  Country: USA  nsigned inventor |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg  Mailing Address: 105 Goucher Terrace  City: Gaithersburg  NAME OF FOURTH INVENTOR:  Given Name: Steven J. (first and middle [if any])                       | [ ] A petition h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ras been filed for this un Family Name: O'CON or Surname  Date  Country: USA  Zip: 20877  has been filed for this un Family Name WALTE or Surname       | Citizenship: USA  Country: USA  nsigned inventor |  |  |
| NAME OF THIRD INVENTOR:  Given Name: Casey J. (first and middle [if any])  Inventor's Signature  Residence: City: Gaithersburg  Mailing Address: 105 Goucher Terrace  City: Gaithersburg  NAME OF FOURTH INVENTOR:  Given Name: Steven J. (first and middle [if any])  Inventor's Signature | State: MD  State: MD  [ ] A petition by the state of the | ras been filed for this un Family Name: O'CON or Surname  Date  Country: USA  Zip: 20877  has been filed for this un Family Name WALTE or Surname  Date | Citizenship: USA  Country: USA  nsigned inventor |  |  |